



NEEDHAM PARK AND RECREATION COMMISSION

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MEDICAL INFORMATION 2010

The Needham Park and Recreation Commission and Needham Board of Health created an agreement in 2001 that would permit the Commission's staff members to **monitor the use of inhalers and administer an Epi-Pen** to a program participant.

What staff will be trained?

All staff members at Mini-Evergreen Adventure, Cricketeer Adventure, Outdoor Living Adventure, Summer Playground, Sports Specialties, Arts and Crafts, Youth Tennis, February Vacation Program and Kids Night Out will be trained in Red Cross CPR, and the administration of Epi-Pens. If your child is attending a program not listed above, **at least two weeks** notice is required, in order for that staff to be trained.

Who will do the training?

Dr. Alan Stern, a Needham pediatrician and a member of the Board of Health has agreed to train the Park and Recreation staff.

How will the Epi-Pens and inhalers be stored?

One staff member will hold the Epi-Pen(s) and inhaler(s) in a waist pouch. That staff person will always be in close proximity to the children who need access to the medication.

What can parents do to assist with the training?

Dr. Stern will provide the official training. It will be important for parents to provide as much information as possible, so that the staff knows how to prevent situations leading to the need for medication, and to understand each individual child's warning signs. The Program Director should be notified if any treatment was done prior to attendance that may affect when the child can receive further treatment.

Why hasn't this permission been given in the past?

In the Commonwealth of Massachusetts, a medical license is required for those who administer medicine. Under the State's Camp Regulations, a medically licensed person can become a Health Care Consultant, becoming responsible for the training of the staff.

SPECIAL NOTES:

- The Park and Recreation staff will not administer any other type of medication to participants, including aspirin.
- The Inhaler/Epi-Pen must be clearly labeled and left on site for the duration of the participant's attendance at the program. The expiration date must fall beyond the last day of attendance at the program. ***Don't forget to pick it up!***

PERMISSION FORM FOR INHALERS OR EPI-PENS

Name of Participant: _____

Phone: _____

Age: _____

Please circle:

Inhaler

Epi-Pen

SPECIFIC DIRECTIONS FOR USE FROM DOCTOR MUST BE SUBMITTED WITH THIS FORM

Name of Program: _____

Date(s) attending: _____

A. Reason inhaler/Epi-Pen is needed: _____

B. Please list warning signs that staff should watch for that would indicate need to use Inhaler/Epi-Pen. _____

C. Who should be contacted if treatment is deemed necessary? WHEN AN EPI-PEN IS USED, 911* WILL BE CONTACTED AUTOMATICALLY. _____

EPI-PEN PERMISSION: I give permission for the Park and Recreation Staff to administer an Epi-Pen to my child. I understand that the medication will be given and 911 contacted prior to the staff contacting me. I have provided doctor's written directions with this form, and will provide properly labeled and dated medication on the first day of the program. I have read and understand the Medical Information provided with this form.

INHALER PERMISSION: I give permission for the Park and Recreation Staff to monitor the use of my child's inhaler. I understand that I will be contacted when use is necessary, and that the staff may need to contact 911 under certain circumstances. I have provided doctor's written directions with this form, and will provide properly labeled and dated medication on the first day of the program. I have read and understand the Medical Information provided with this form.

Parent/Guardian Signature: _____

Date: _____